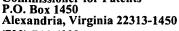
## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for

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23117 7:	590 07/06/2004	(IDA)		have its own certificat	al paper, such as an assignme e of mailing or transmission.	on or rolling alag,a.	
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		TRADEMARTI				(Date)	
APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR		ENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/485,845	04/26/2000	/2000 HIDENORI FUNAMIZU			2554-7	5849	
TITLE OF INVENTION: N	I-ACYLATED LIPOPHILIC	AMINO ACID DE	RIVATIVES	03/E3/2004 HK	ELECH2 00000040 09485	i845	
			01 FC:1501 02 FC:8001		1330.00 DP 12.00 DP		
APPLN. TYPE	SMALL ENTITY	ISSUE FEI	E	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1330	1	\$0	\$1330 10/06/2004		
EXAMINER		ART UNIT	r	CLASS-SUBCLASS	1		
COLEMAN, BRENDA LIBBY		1624	514-211040		_		
1. Change of correspondence CFR 1.363).	e address or indication of "Fe	ee Address" (37		on the patent front page, l	, NIXON	& VANDERHYE P.C.	
☐ Change of correspond	ence address (or Change of C	Correspondence	(1) the names or agents OR, a	of up to 3 registered pate lternatively,	nt attorneys		
Address form PTO/SB/122) attached.			(2) the name of a single firm (having as a member a 2				
Tee Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Cust Number is required.			registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON TH	IE PATENT (pri	nt or type)		<u>.</u>	
PLEASE NOTE: Unless recordation as set forth in	s an assignee is identified be n 37 CFR 3.11. Completion	elow, no assignee da of this form is NOT	ata will appear o a substitute for fi	n the patent. If an assigling an assignment.	nee is identified below, the o	document has been filed for	
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
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Molecular Research Institute Mountain View, California							
Please check the appropriate	e assignee category or catego	ries (will not be prin	ited on the patent	); □ individual 🕸	corporation or other private g	roup entity	
4a. The following fee(s) are enclosed:  4b. Payment of Fee(s):							
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a. Applicant claims Sr	MALL ENTITY status. See 3	/ CFR 1.27. C	J b. Applicant is	not claiming SMALL EN	TITY status. See, e.g., 37 CF	K 1.27(g)(2).	
					ly paid issue fee to the applic gistered attorney or agent; or t		
(Authorized Signature)	Yolah Cule	(Date)					
Arthur R. Cra	wford, 25,3/27	Sept. 28	3, 2004				
an application. Confidential submitting the completed a this form and/or suggestion.	lity is governed by 35 U.S.C. pplication form to the USPT s for reducing this burden, sh ginia 22313-1450. DO NOT	11. The information 122 and 37 CFR 1. O. Time will vary doubt be sent to the	is required to ob 14. This collection depending upon the Chief Information	on is estimated to take 12 he individual case. Any c n Officer, U.S. Patent and	the public which is to file (ar minutes to complete, includi omments on the amount of t I Trademark Office, U.S. Dep S. SEND TO: Commissioner	ng gathering, preparing, and/ ime you require to complete partment of Commerce, P.	

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